

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	T.D.		4/26/93
O.I.P.E. CLASSIFIER		601X80	5-4-97
FORMALITY REVIEW			5-27-97

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 — (Through numeral).... Canceled
 ÷ Restricted

N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Date
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Claim	Date
Final	
Original	
51	1/1/93
52	1/1/93
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56	1/1/93
57	1/1/93
58	1/1/93
59	1/1/93
60	1/1/93
61	1/1/93
62	✓/1/93
63	✓/1/93
64	N/1/93
65	✓/1/93
66	✓/1/93
67	N/1/93
68	✓/1/93
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76	✓/1/93
77	✓/1/93
78	N/1/93
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80	✓/1/93
81	N/1/93
82	✓/1/93
83	✓/1/93
84	✓/1/93
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89	✓/1/93
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98	✓/1/93
99	✓/1/93
100	✓/1/93

Claim	Date
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If more than 150 claims or 10 actions
staple additional sheet here

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